

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)							SERIAL NO. 10/619347	FILING DATE		
							APPLICANT(S)			
1/3/05 7/18/05 CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT					
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1									
2		1				1				
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TOTAL IND.	1		1							
TOTAL DEP.	17		12							
TOTAL CLAIMS	18		13							

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PTO-1360 (2-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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